

Amendments to the claims:

This listing of claims will replace all prior versions and listings of claims in the application:

Listing of Claims:

1. (Withdrawn) A device for protecting the umbilicus during abdominal surgery comprising an open-ended vessel having a distal end and a proximal end for encapsulating the umbilicus and umbilical pedicle abdominal surgery.
2. (Withdrawn) The device of claim 1 wherein said vessel is a tubular element; and has a means for releasably retaining suture material near said proximal end.
3. (Withdrawn) The device of claim 2 further comprising a plunger type, suture shuttle element, for slidable insertion into the tubular element, having a proximal end and a distal end wherein said suture shuttle element contains, proximate its distal end, means for releasably retaining said suture material.
4. (Withdrawn) The device of claim 3 wherein said the means for releasably retaining suture material comprises notched portions.
5. (Withdrawn) The device of claim 4 wherein said notched portions of the tubular element are retained in a circular lip disposed upon the proximal end and an upstanding collar portion proximate the end wall of said tubular element.
6. (Withdrawn) The device of claim 4 wherein said notched portions of the tubular element are retained on opposing ears disposed peripherally of the proximal end of said tubular element.
7. (Withdrawn) The device of claim 6 wherein said ears are of a size such that they can be used manipulate the tubular element during surgery.
8. (Withdrawn) The device of claim 4 wherein said tubular element contains, on the proximal outer surface thereof, markings in relationship to such notched portions to orient the tubular element, relative to the notches.
9. (Withdrawn) The device of claim 8 wherein said markings are black printed “UP” and “DOWN”, R (right) and L (left) wherein each is disposed in each quadrant of the tubular element, wherein UP marks the superior (upper) aspect of the midline on the patient; and, DOWN marks the inferior (bottom) aspect of the midline of the patient.

10. (Withdrawn) The device of claim 3 wherein said suture shuttle element contains, atop its proximal end a plunger type knob; and, proximate its distal end a plate in which said means for releasably retaining said suture material is disposed.
11. (Currently amended) A method for protecting an umbilicus during subcutaneous abdominal surgery comprising circum dissecting the umbilicus and enveloping the umbilical and the umbilical pedicle within an open ended vessel, which vessel has a distal end and a proximal end, proximate the distal end to thereby protect the umbilical and the umbilical pedicle during the subcutaneous surgery.
12. (Previously presented) The method of claim 11 wherein said vessel comprises a tubular element.
13. (Previously presented) The method of claim 11 wherein said enveloping is accomplished by drawing said umbilical pedicle interior said vessel.
14. (Previously presented) The method of claim 13 wherein said drawing is accomplished by means of tacking sutures in said umbilicus.
15. (Previously presented) The method of claim 14 wherein said tacking sutures are drawn through said vessel by means of a suture shuttle element.
16. (Previously presented) The method of claim 15 wherein said tacking sutures are maintained in tension within said vessel by means of notches on the proximal end of said tubular element.
17. (Withdrawn) A device for protecting the umbilicus during umbilicoplasty abdominal surgery comprises:
 - a. a tubular element, having a distal end and a proximal end; and,
 - b. a plunger type, suture shuttle element, for slidable insertion into the tubular element, having a proximal end and a distal end, wherein said tubular element contains, proximate its proximal end, means for releasably retaining suture material; and, said suture shuttle element contains, proximate its distal end, means for releasably retaining suture material.
18. (Withdrawn) The device of claim 17 wherein said the means for releasably retaining said suture material comprises notched portions.
19. (Withdrawn) The device of claim 18 wherein said notched portions of the tubular element are retained in the proximal end wall of said tubular element.

20. (Withdrawn) The device of claim 18 wherein said notched portions of the tubular element are retained on opposing ears disposed peripherally of the proximal end said tubular element.
21. (Withdrawn) The device of claim 20 wherein said ears are of a size such that they can be used manipulate the tubular element during surgery.
22. (Withdrawn) The device of claim 17 wherein said tubular element contains, on the proximal outer surface thereof, markings in relationship to such notched portions to orient the tubular element, relative to the notches.
23. (Withdrawn) The device of claim 22 wherein said markings are black printed "UP" and "DOWN", R (right) and L (left) wherein each is disposed in each quadrant of the tubular element, wherein UP marks the superior (upper) aspect of the midline on the patient; and, DOWN marks the inferior (bottom) aspect of the midline of the patient.
24. (Withdrawn) The device of claim 17 wherein said suture shuttle element contains, atop its proximal end a plunger type knob; and, proximate its distal end a plate in which said means for releasably retaining said suture material are disposed.
25. (Withdrawn) The device of claim 17 wherein said distal end of the tubular element contains a Teflon® coated, electrocautery, cutting, ring-shaped blade to provide an electrocautery dissector for umbilical pedicle dissection down to the abdominal fascia.
26. (Currently amended) A method for protecting the umbilicus during abdominal surgery comprising the steps of:
- a. circum dissecting the umbilicus;
 - b. securing at least a pair of tacking sutures to the superior and inferior point of the midline of the umbilicus;
 - c. inserting a suture shuttle through a tubular element;
 - d. attaching the suture material from the tacking sutures to ~~the~~ notches contained in the distal end of the suture shuttle element;
 - e. pulling the suture shuttle element through the tubular element while pushing the tubular element into the circum dissected incision to capture the umbilical pedicle interior the tubular element;
 - f. tensioning the suture material to draw the umbilical pedicle within the tubular element; and,
 - g. attaching the suture material to the tubular element.

27. (Previously presented)The method of claim 26 wherein the tubular element has notched opposing ears for attaching the suture material to said tubular element.
28. (Previously presented)The method of claim 26 wherein said tubular element contains, on the proximal outer surface thereof, markings in relationship to such notches to orient the tubular element, relative to the notches.
29. (Previously presented)The method of claim 28 wherein said superior tacking suture corresponds to an “UP” marking on said tubular element and the inferior tacking suture corresponds to a “DOWN” marking on the tubular element.
30. (Previously presented)The method of claim 26 wherein said tubular element has notches disposed in the end wall of said tubular element for attaching said sutures.
31. (Previously presented)The method of claim 26 comprising the further step of dissecting said umbilical pedicle by dissecting proximate the exterior of said tubular member from the abdominal skin to the to the abdominal fascia.
32. (New) A method for protecting an umbilicus during subcutaneous abdominal surgery comprising circum dissecting the umbilicus and enveloping the umbilical and the umbilical pedicle within an open ended vessel during surgery wherein said enveloping is accomplished by drawing said umbilical pedicle interior said vessel by means of tacking sutures in said umbilicus.
33. (New) The method of claim 32 wherein said vessel comprises a tubular element.
34. (New)The method of claim 32 wherein said tacking sutures are drawn through said vessel by means of a suture shuttle element.
35. (New)The method of claim 32 wherein said tacking sutures are maintained in tension within said vessel by means of notches on the proximal end of said tubular element.